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ARIZONA STATE B  1. PLACE OF BIRTH  BUREAU OF VIT	'AL STATISTICS State File 1	No. 122
STANDARD CERTI	FICATE OF BIRTH Registered 1	No
County LULA	State ariona	
District or Township	or Village	***************************************
City Miano	Propingli No i X 1	
City Mann No Mann (If birth occurred and Such	in a hospital or institution, give its NAME instead of  (Let   If child is not supplemental)	street and number)
3. Sex of Child   To be answered ONLY ) 4. Twin, triplet or other.		report, as directed.
male births.	7. Date	6 /9L9 Day Year
8. FATHER	14. Monum	_
8. FATHER Full name Jahn Earl Buckley 9. Residence (Lower) min	Full maiden name Trance Josephin	e Radmelia
(Usual place of abode)	15. Residence (Usual place of abode)	
If non-resident, give place and state. Whyone	If non-resident, give place and state. A-1	cosuc
10. Color or race	16. Color or race	<i>d</i> —
White 11. Ago at last birthday 32 (Years)	Totale 17. Age at last birth	der 29 (v)
12. Birthplace (city or place). Butte	18. Birthplace (city or place) Butte	(1ears)
(State or country) Montana	(State or country) Min lan	A
13. Occupation Barkeete	19. Occupation	,
Nature of industry Contine mine	Nature of Industry Houseway	U
20. Number of children of this mother (a) Born alive a	nd now living	taken sesinet out
(Taken as of time of birth of child herein } (b) Born alive by	it now dead 3 thalmia neonatoru	m.
	VC DEVOICE IN CO.	·
I hereby certify that I attended the birth of this child, who was all	NG PHYSICIAN OR MIDWIFE	
* When there was no attending physician or midwife, then the father, householder.	orn alive or stillborn)	o date above stated.
child is one that neither breathes nor shows other evidence of life after birth.	md	
Given name added from	Miani, augre	e).
128-106-678 Piled 20	u11,1029 lo. E. Di	——————————————————————————————————————
Registrar.		

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Registrar.